MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO.	FILING DATE
APPLICANT(S)	

CLAIMS

	AS FILED IND.	AS FILED DEP.	AFTER 1st AMENDMENT IND.	AFTER 1st AMENDMENT DEP.	AFTER 2nd AMENDMENT IND.	AFTER 2nd AMENDMENT DEP.			* IND.	* DEP.	* IND.	* DEP.	* IND.	* DEP.
1	1							51						
2		1						52						
3		2						53						
4		2						54						
5		2						55						
6		2						56						
7	1							57						
8		1						58						
9		1						59						
10		1						60						
11		1						61						
12		1						62						
13		1						63						
14		1						64						
15		1						65						
16		1						66						
17		4						67						
18		1						68						
19		1						69						
20		2						70						
21		2						71						
22	1							72						
23	1							73						
24	1							74						
25		2						75						
26		2						76						
27		2						77						
28		2						78						
29		2						79						
30		2						80						
31		2						81						
32		2						82						
33		2						83						
34		2						84						
35		2						85						
36		(1)						86						
37	1							87						
38		3						88						
39		3						89						
40		3						90						
41	1							91						
42		1						92						
43	1							93						
44	1							94						
45								95						
46								96						
47								97						
48								98						
49								99						
50								100						
TOTAL IND.	9	↓		↓		↓		TOTAL IND.		↓		↓		↓
TOTAL DEP.	61	←		←		←		TOTAL DEP.		←		←		←
TOTAL CLAIMS	70							TOTAL CLAIMS						

* *MAY BE USED FOR ADDITIONAL CLAIMS OR ADMENDMENTS*

FORM PTO-1360 (REV. 3-78)

U.S. DEPARTMENT OF COMMERCE
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